



12-17-07

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PTO/SB/21 (11-07)

Approved for use through 11/30/2007. OMB 0651-0031

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**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/602,562-Conf. #8041	
	Filing Date	June 24, 2003	
	First Named Inventor	Michael N. ALEKSHUN	
	Art Unit	1657	
	Examiner Name	K. C. Srivastava	
Total Number of Pages in This Submission		Attorney Docket Number	PAZ-190

**ENCLOSURES (Check all that apply)**

<input checked="" type="checkbox"/> Fee Transmittal Form  <input type="checkbox"/> Fee Attached  <input type="checkbox"/> Amendment/Reply  <input type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input checked="" type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Reply to Missing Parts/Incomplete Application  <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert to a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) _____  <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):  Return Receipt Postcard PTO form SB/08 Certificate of Mailing Copies of Seven (7) References
<b>Remarks</b>		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm Name	LAHIVE & COCKFIELD, LLP		
Signature			
Printed name	Megan E. Williams		
Date	December 13, 2007	Reg. No.	43,270

Express Mail Label No. EM 066425062 US Dated: December 13, 2007



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<b>Effective on 12/08/2004.</b> <b>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</b> <b>FEE TRANSMITTAL</b> <b>For FY 2008</b>		<b>Complete if Known</b>		
		Application Number	10/602,562-Conf. #8041	
		Filing Date	June 24, 2003	
		First Named Inventor	Michael N. ALEKSHUN	
		Examiner Name	K. C. Srivastava	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27	Art Unit	1657		
TOTAL AMOUNT OF PAYMENT	(\$)	180.00	Attorney Docket No.	PAZ-190

**METHOD OF PAYMENT** (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_

☒ Deposit Account Deposit Account Number: 12-0080 Deposit Account Name: Lahive & Cockfield, LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

**FEE CALCULATION**

**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	310	155	510	255	210	105	
Design	210	105	100	50	130	65	
Plant	210	105	310	155	160	80	
Reissue	310	155	510	255	620	310	
Provisional	210	105	0	0	0	0	

**2. EXCESS CLAIM FEES**

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	210	105
Multiple dependent claims	370	185

**Total Claims**      **Extra Claims**      **Fee (\$)**      **Fee Paid (\$)**

\_\_\_\_\_ - = \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_

HP = highest number of total claims paid for, if greater than 20.

**Indep. Claims**      **Extra Claims**      **Fee (\$)**      **Fee Paid (\$)**

\_\_\_\_\_ - = \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_

HP = highest number of independent claims paid for, if greater than 3.

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
_____ - 100 = _____	/50 = _____	(round up to a whole number) x _____	= _____	

**4. OTHER FEE(S)**

	Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)	
Other (e.g., late filing surcharge): 1806 Submission of an Information Disclosure Statement	180.00

<b>SUBMITTED BY</b>			
Signature		Registration No. (Attorney/Agent)	43,270
Name (Print/Type)	Megan E. Williams	Telephone	(617) 994-0761
		Date	December 13, 2007



Express Mail Label No. EM 066425062 US Dated: December 13, 2007

Docket No.: PAZ-190  
(PATENT)

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Patent Application of:  
Michael N. Alekshun *et al.*

Application No.: 10/602,562

Confirmation No.: 8041

Filed: June 24, 2003

Art Unit: 1657

For: METHODS FOR PREVENTING AND  
TREATING MICROBIAL INFECTIONS BY  
MODULATING TRANSCRIPTION  
FACTORS

Examiner: K. C. Srivastava

MS Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT (SIDS)**

Dear Sir:

In accordance with 37 CFR 1.97, Applicants hereby make of record the following additional documents. A PTO Form SB/08 and a full copy of each of the documents required under 37 CFR 1.98(a)(2) accompany this statement.

Applicants have become aware of the following documents, cited in a European Search Report issued November 7, 2007, during the prosecution of Application No. 03742158.3 - 1216, which corresponds to the above referenced application, and in accordance with 37 CFR 1.97(c) and (e)(1) or (b)(3), hereby submit(s) these documents for the Examiner's consideration. These documents are cited on the enclosed PTO Form SB/08, and a copy of the Search Report and of each document required under 37 CFR 1.98(a)(2) cited thereon are enclosed as well.

Applicants have not submitted a copy of the cited U.S. patent in accordance with 37 CFR 1.98(a)(2)(ii). Applicants submit herewith copies of foreign patents and non-patent references in accordance with 37 CFR 1.98(a)(2).

12/18/2007 ATRINH 00000029 120000 10602562  
01 FC:1006 100.00 DA

This statement is not to be interpreted as a representation that the cited documents are material, that an exhaustive search has been conducted, or that no other relevant information exists. Nor shall the citation of any document herein be construed *per se* as a representation that such document is prior art. Moreover, Applicants understand the Examiner will make an independent evaluation of the cited documents.

This Supplemental Information Disclosure Statement is filed after the mailing date of a Final Office Action but before payment of the Issue Fee (37 CFR 1.97(d)). Applicant hereby petition that the Supplemental Information Disclosure Statement be considered.

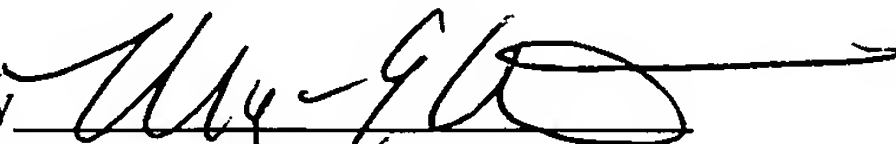
I hereby certify, pursuant to 37 CFR 1.97(e)(1), that each item of information contained in this Supplemental Information Disclosure Statement was first cited in any communication from a foreign patent office in a counterpart foreign application not more than three months prior to the filing of this Supplemental Information Disclosure Statement.

Please charge our Deposit Account No. 12-0080 in the amount of \$180.00 covering the fee set forth in 37 CFR 1.17(p). The Director is hereby authorized to charge any deficiency in the fees filed, asserted to be filed or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Deposit Account No. 12-0080, under Order No. PAZ-190.

Dated: December 13, 2007

MEW/MBC/mch

Respectfully submitted,

By 

Megan E. Williams

Registration No.: 43,270

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Application No. (if known): 10/602,562

Attorney Docket No.: PAZ-190

## Certificate of Express Mailing Under 37 CFR 1.10

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail, Airbill No. EM 066425062 US in an envelope addressed to:

MS Amendment  
Commissioner for Patents  
P.O. Box 1450-  
Alexandria, VA 22313-1450

on December 13, 2007  
Date

Signature

Megan E. Williams

Typed or printed name of person signing Certificate

43,270

Registration Number, if applicable

(617) 994-0761

Telephone Number

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Return Receipt Postcard  
Transmittal (1 page)  
Fee Transmittal (1 page, in duplicate)  
Supplemental Information Disclosure Statement (2 pages)  
PTO form SB/08 (8 References) (1 page)  
Copies of Seven (7) References